

Home: 547-3449  
Pager: 599-4120

Office Hours: Wednesday, 7:00-9:00 p.m.  
Office: 547-3442

**TOWN OF GREENFIELD**  
BUILDING INSPECTOR  
FRANCESTOWN RD.  
GREENFIELD, NH 03047

**ELECTRIC PERMIT APPLICATION**

JOB LOCATION: \_\_\_\_\_

ELECTRIC PERMIT # \_\_\_\_\_  
BUILDING PERMIT # \_\_\_\_\_  
LOT # \_\_\_\_\_  
FEE PAID \_\_\_\_\_

\_\_\_\_\_ Residential  
\_\_\_\_\_ Commercial (Additional Application Required)  
\_\_\_\_\_ Industrial (Additional Application Required)

New Addition Rewiring Service Other \_\_\_\_\_

SERVICE: Amps Volts  
Main Disconnects

Current Transformer  
Submain Panels

\_\_\_\_\_ 15A Receptacles  
\_\_\_\_\_ 20A Sm Appliance Recpt.  
\_\_\_\_\_ 15A Lighting Outlets  
\_\_\_\_\_ Other

\_\_\_\_\_ 15A Branch Cir  
\_\_\_\_\_ 20A Appliance Branch Cir  
\_\_\_\_\_ 220V Appliance Branch Cir

Central AC  
Electric Heat/Total RW  
Pool  
Jacuzzi/Hot Tub

Branch Circuits

DESCRIPTION OF WORK: (Not required for new residence)

APPLICANT CERTIFIES THAT HE IS A NEW HAMPSHIRE LICENSED MASTER ELECTRICIAN AND THAT ALL STATE AND LOCAL CODES WILL BE COMPLIED WITH.

MASTER ELECTRICIAN SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

NH LICENCE # \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

OWNER \_\_\_\_\_

DBA \_\_\_\_\_

ADDRESS \_\_\_\_\_

ADDRESS (ZIP) \_\_\_\_\_

TELEPHONE \_\_\_\_\_

TELEPHONE ( ) \_\_\_\_\_

APPROVED (DATE) \_\_\_\_\_

Building Inspector

REJECTED (DATE) \_\_\_\_\_